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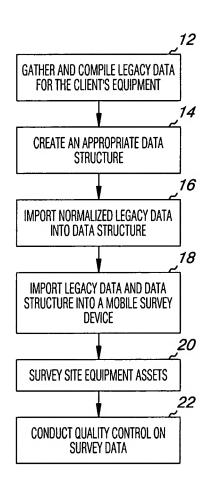


Fig. 1

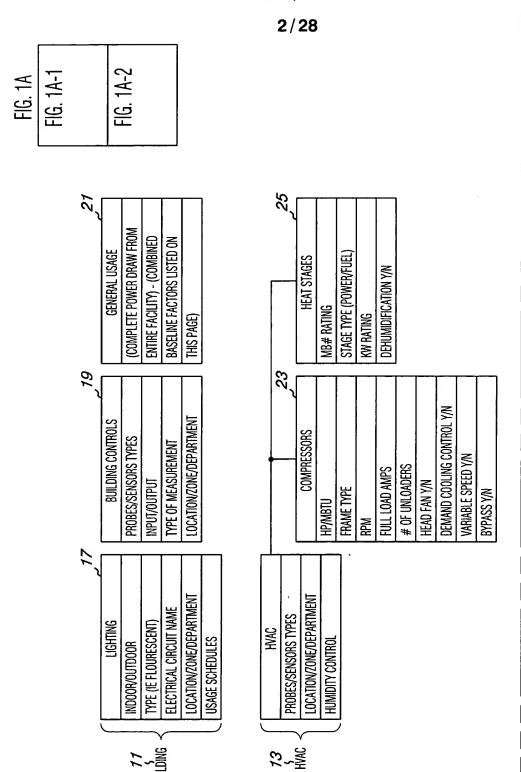
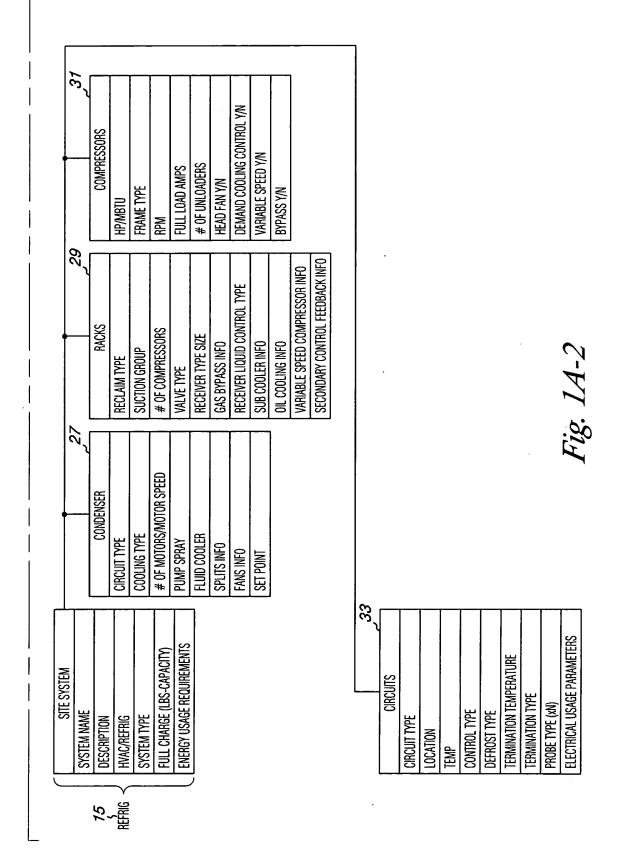


Fig. 14-1

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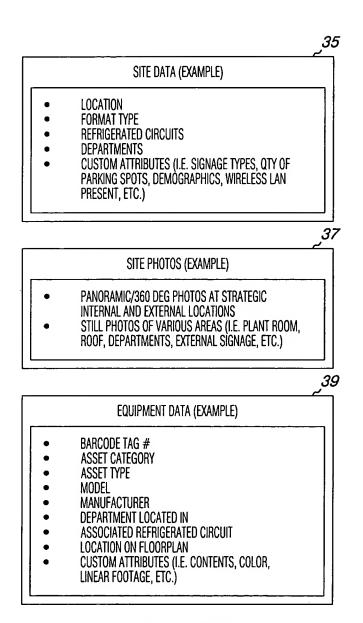


Fig. 1B

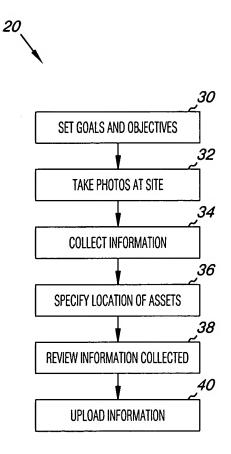
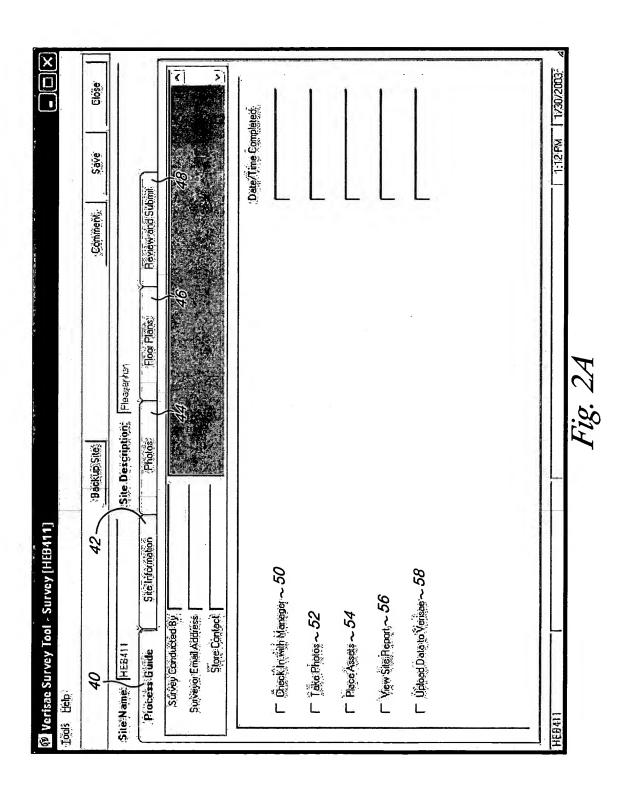
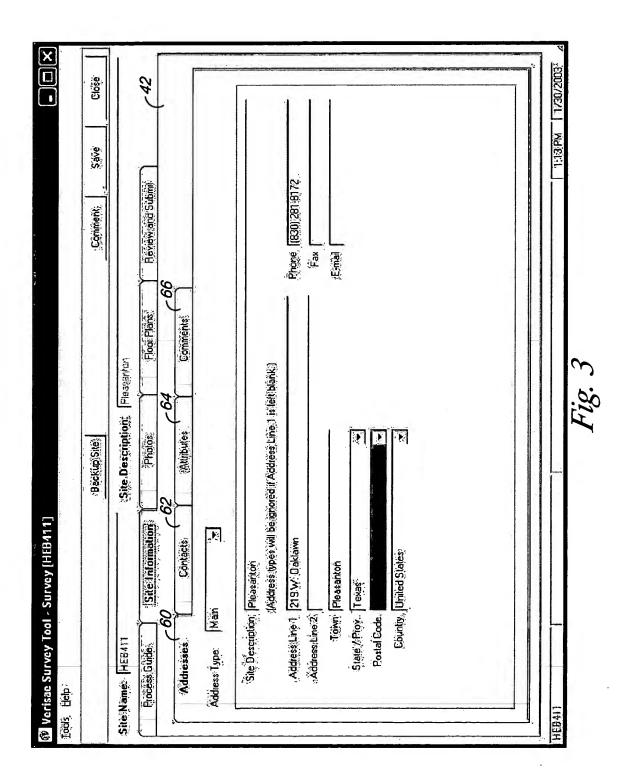


Fig. 2

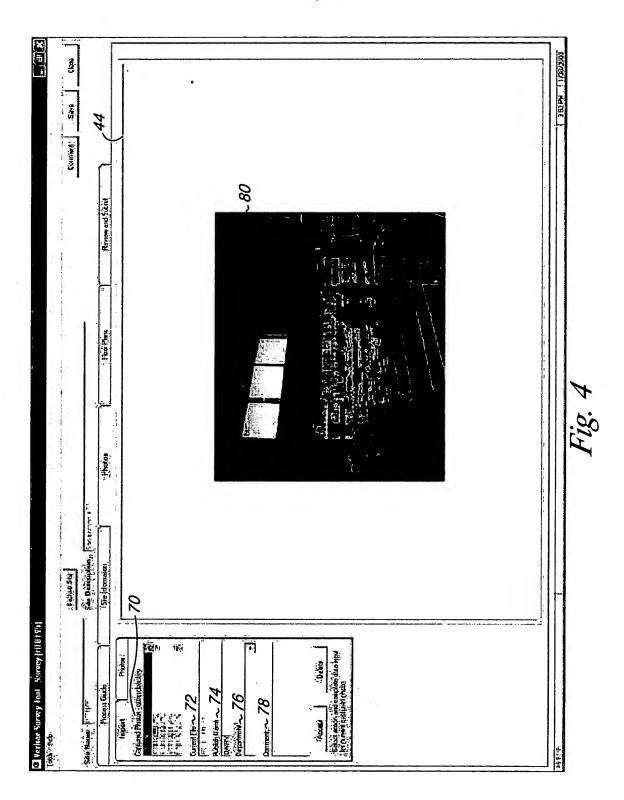
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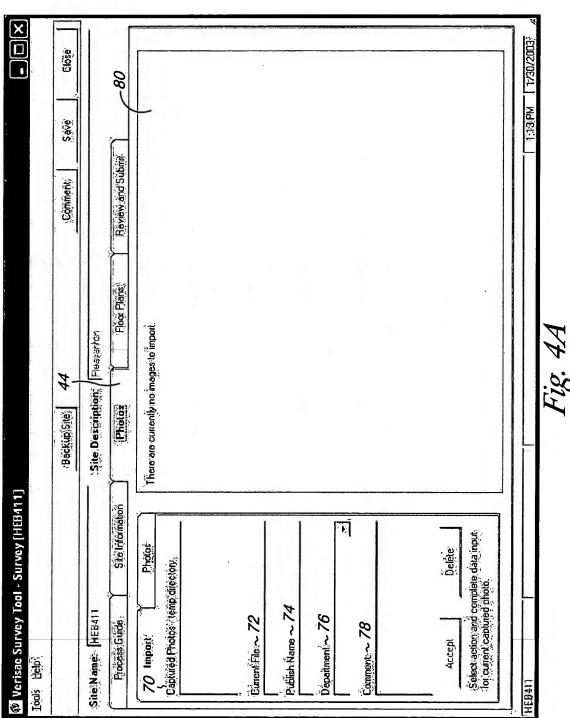
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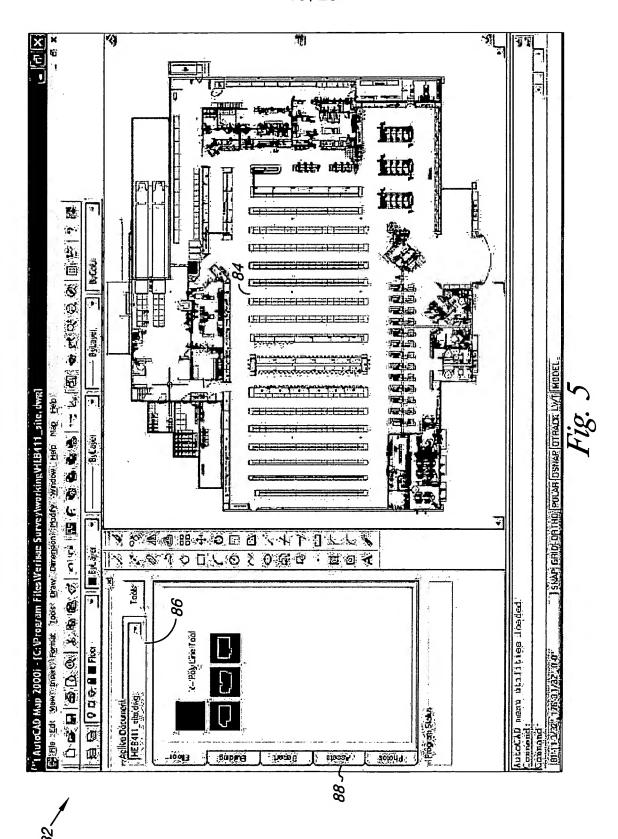


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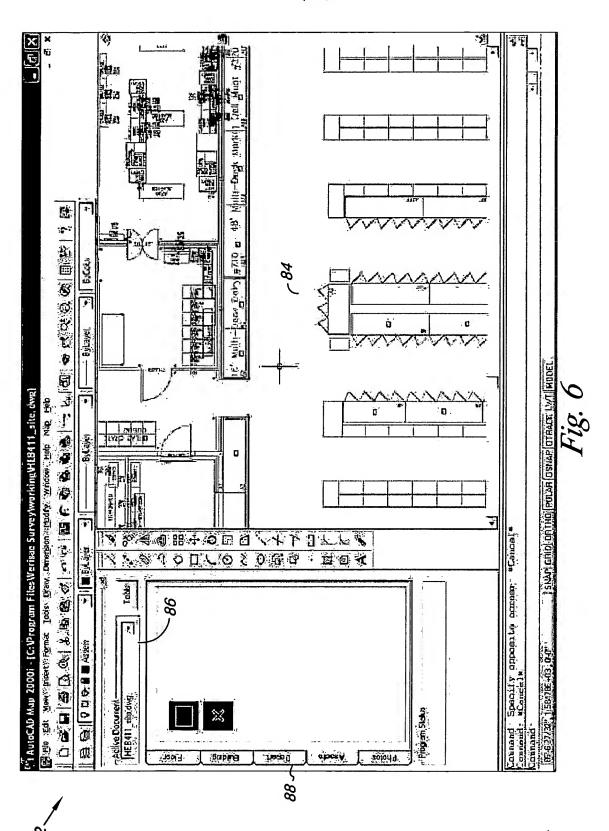


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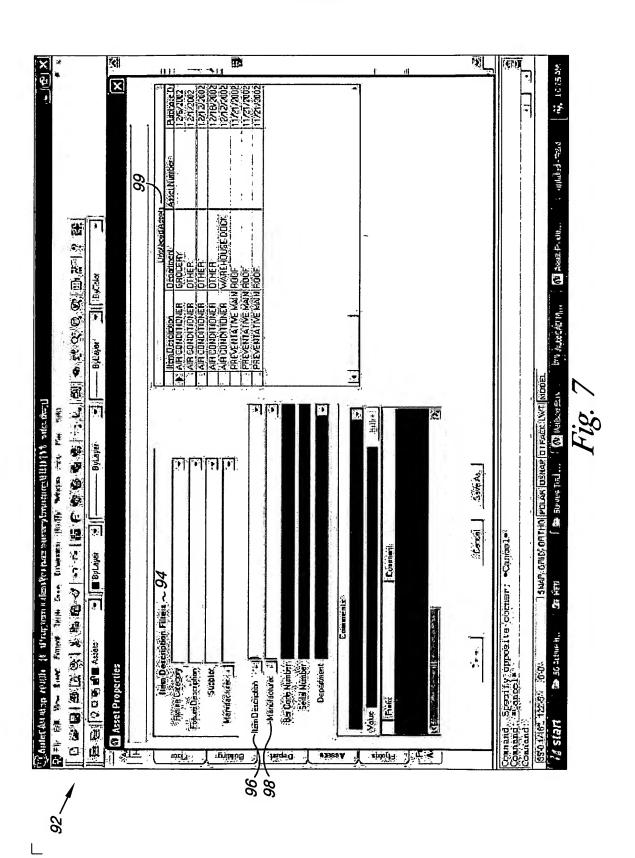


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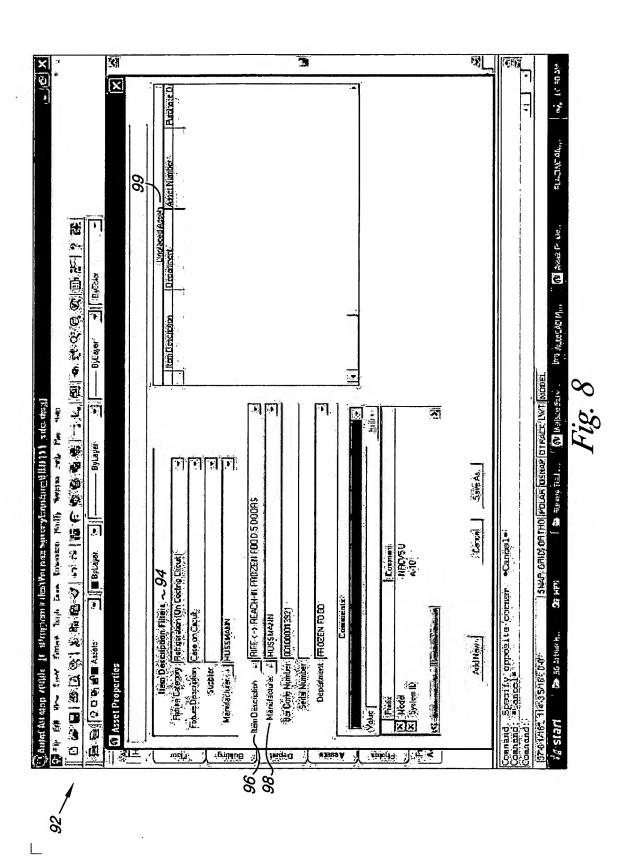


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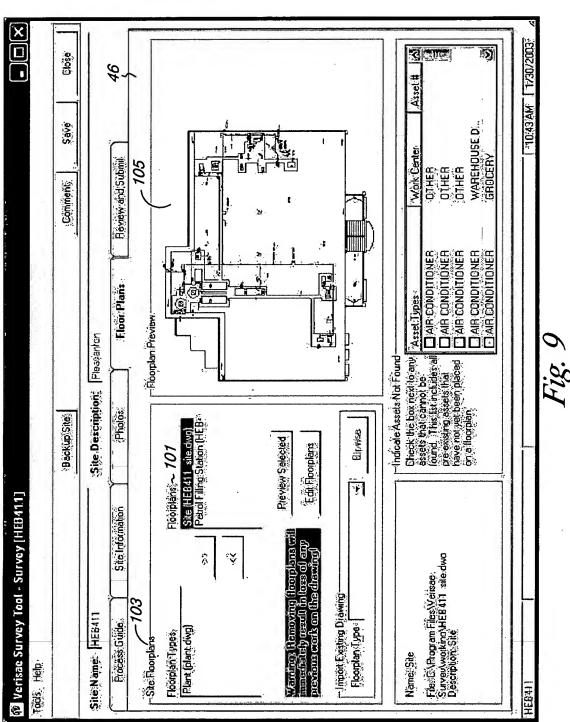
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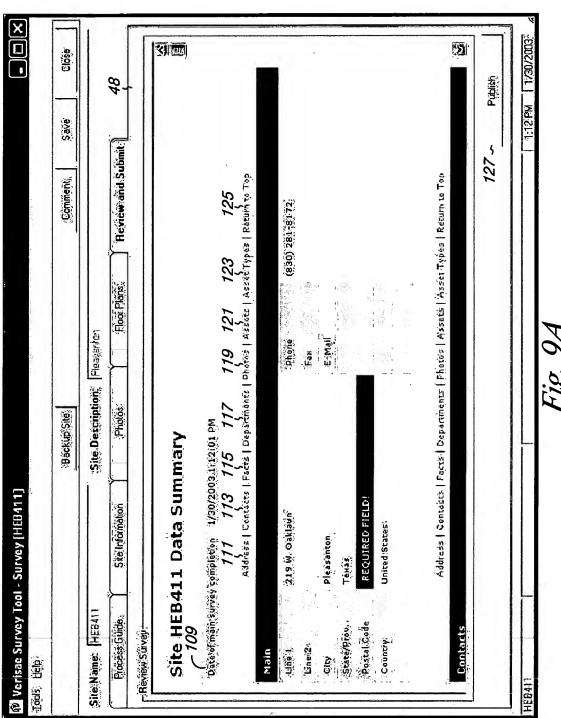


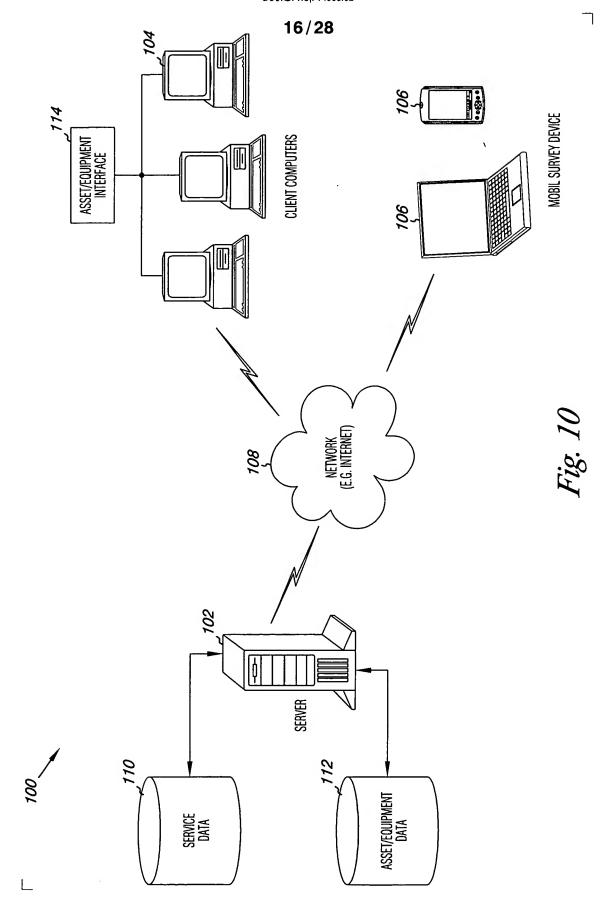
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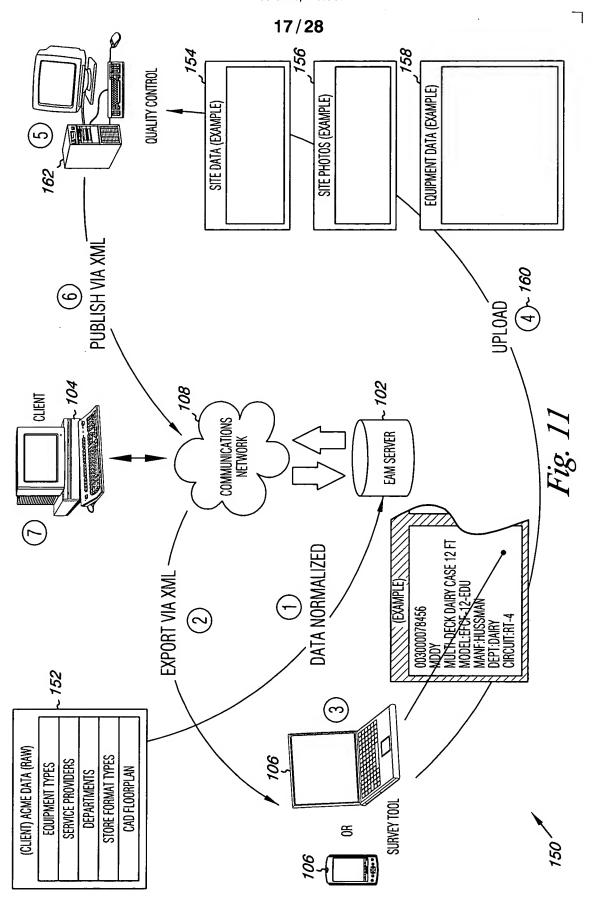


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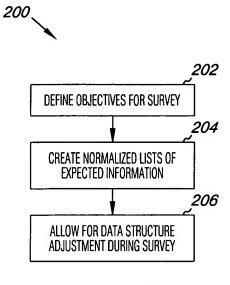


Fig. 12

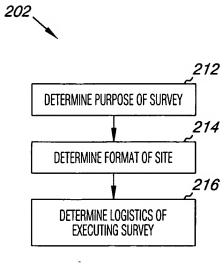


Fig. 13

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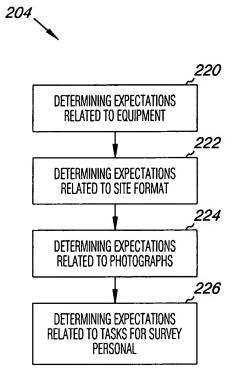


Fig. 14

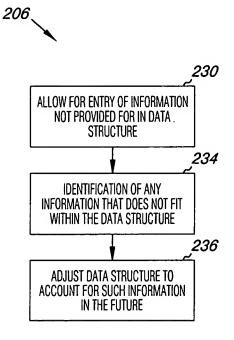


Fig. 15

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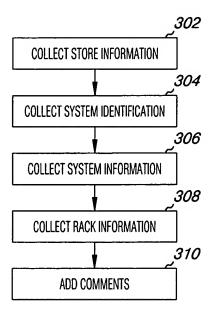


Fig. 16

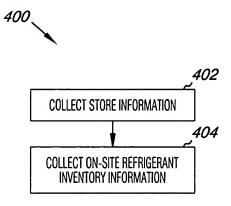


Fig. 18

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SITE REFRIGERATION SYSTEMS SURVEY FORM (FORM 1)

SYSTEM NAME / ID:								
STORE #	· · · · · · · · · · · · · · · · · · ·		CONTRACTOR GROUP		TECHNICIAN NAME:			
STORE ADDRES	SS		EPA CERTIFICATION#:		TECHNICIAN PHONE #:			
SYSTEM INFOR	MATION							
EPA CATEGORY		HVAC I COMMERCIAL REFRIGERATION						
CHARGE DETERMINATION METHOD 1		ON-SITE DOCUMENTATION CALCULATION MEASUREMENT MANUFACTURER'S INFORMATION (ESTABLISHED RANGE)						
FULL CHARGE	CAPACITY (LBS.) ₂							
REFRIGERANT TYPE		R-12 R-22 R-134A R-401A R-402A R-404A R-408A R-502 R-507 OTHER (MP39) (HP-80) (HP-62)						
SYSTEM STATU	JS	NORMAL OPERATION OPERATING UNDER EXTENSION SHUTDOWN RETROFIT IN PROGRESS						
SYSTEM CONF	GURATION	RACK (R) SINGLE UNIT (U) SELF-CONTAINED (SC) AIR CONDITIONER (AC) OTHER (O)						
SYSTEM TYPE		LOW TEMP (LT) MEDIUM TEMP (MT)						
ON-SITE CHARGE DOCUMENTATION								
SYSTEM DESCRIPTION (INCL, AREA OR FIXTURES SERVED)								
RACK INFORMA	ATION (AS NEEDED)			COMPRESSORS	3			
RACK MANUFA	CTURER			COMPRESSOR MANUFACTURE	R M	ODEL#	HP	
RECEIVER VOL	JME (L*π*R ²) (FT ³)							
1. FULL CHARGE DETERMINATION ORDER:		(1) ON-SITE DOCUMENTATION, (2) CALCULATION, (3) MEASUREMENT, (4) MANUFACTURER'S INFORMATION (ESTABLISHED RANGE)						
		•	VOLUME (FT ³) * DENSITY * 1.5)					
		SINGLE UNIT OR	SELF-CONTAINED OR AC: RSEPOWER * 9]					
DENSITY PER R	EFRIGERANT TYPE:	R-12 (83.93), R-2 R-401A (76.60), I R-408A (69.41), I	22 (76.77), R-134A (77.44), R-402A (74.76), R-404A (68.11), R-502 (74.67), R-507 (64.92)					
					TOTAL HORSEPOWER →			
COMMENTS:_								

REFRIGERANT TYPE
EPA CERTIFICATION#:
RECLAIMED CYLINDER SIZE CHARGE R-408A R-502 R-507 OTHER YES NO 30# 50# 125# 1000# R-408A R-502 R-507 OTHER YES NO 30# 50# 125# 1000# R-408A R-502 R-507 OTHER YES NO 30# 50# 125# 1000# R-408A R-502 R-507 OTHER YES NO 30# 50# 125# 1000# R-408A R-502 R-507 OTHER YES NO 30# 50# 125# FULL EMPTY 11/2 13/4 FULL EMPTY 11
RECLAIMED CYLINDER SIZE CHARGE
R-408A R-502 R-507 OTHER YES NO 30# 50# 125# 1000# PRINT 1 1 1 1 2 1 3 4 1 EMPTY 1 1 4 1 1 2 1 3 4 1 EMPTY 1 1 4 1 1 2 1 3 4 1 EMPTY 1 1 4 1 1 2 1 3 4 1 PRINT 1 1 2 1 3 4 1 EMPTY 1 4 1 1 2 1 3 4 1 EMPTY 1 4 1 1 2 1 3 4 1 EMPTY 1 4 1 1 2 1 3 4 1
EMPTY 11/4 11/2 13/4 FULL
EMPTY 1/4 1/2 13/4 FULL
EMPTY 11/4 11/2 13/4 FULL EMPTY 11/4 11/2 13/4 FULL EMPTY 11/4 11/2 13/4 FULL
EMPTY 11/4 11/2 13/4 I FULL EMPTY 11/4 11/2 13/4 I FULL
EMPTY 11/4 11/2 13/41 FULL EMPTY 11/4 11/2 13/41 FULL
EMPTY 11/2 3/4 FULL
EMPTY 11/4 11/2 13/4 FULL
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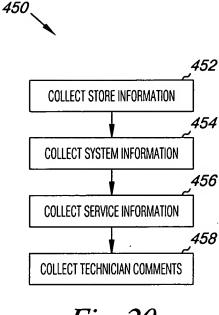


Fig. 20

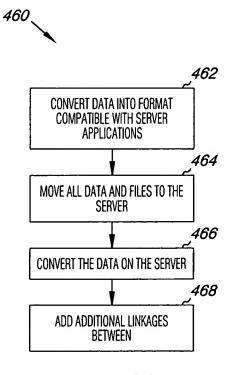


Fig. 22

24/28 REFRIGERANT USAGE LEAK CHECK/REPAIR REPORT (FORM 2)

			FOR CLIENT USE: DATE RECEIVED LEAK RATE ACCEPTABLE? (Y/N)		
STORE #					
SITE SYSTEM					
REFRIGERANT TYPE	R-12 R-22 R-134A R-40 (MP3	1A R-402A R-404A R-408 39) (HP-80) (HP-62)	BA R-502 R-507 OTHER:		
AMOUNT ADDED (LBS.)	•				
AMOUNT RECOVERED (LBS.)					
DATE OF SERVICE					
SERVICE REFERENCE # (WORK ORDER # - ASSIGNED BY DIVISION)					
LEAK STATUS	NA I LEAK REPAIRED I	REPAIRED ATTEMPTED			
TECHNICIAN COMMENTS					
EXACT LEAK LOCATION(S), BE SPECIFIC:					
NO; DESCRIBE	PAIRED? ABLE (NO LEAKS WERE IDENTIFIED O E WHY AND NOTE DATES ANTICIPATI BE LEAK REPAIR METHODS	ED FOR COMPLETION:			
	(CIRCLE ONE): BUBBLE ELEC				
·	,				
ADDITIONAL COMMENTS:	I) IF YES, DATE SCHED	ULE:			
APPROPRIATE, THAT AI SIGNATURE:	WING: I CERTIFY, BASED ON MY SOU LL IDENTIFIED LEAKS HAVE BEEN RE	PAIRED IN ACCORDANCE WITH E (SAME TECHNICIA	PA REGULATION 40 CFR PART 82. In as identified Bellow)		
TECHNICIAN NAME:	(PRINT NAME)	PHONE NUMBER :	#		
	(PRINT NAME)		#		
HAVE VERIFIED THE SERVICE TEC FORM. IF A LEAK IS DETECTED A	CHNICIAN IS EPA CERTIFIED AND TH	AT YOU UNDERSTAND THE COMP (ICE, CONTACT YOUR DESIGNATE)	IGNATURE BELOW CONFIRMS THAT YOU PANY POLICY AND INFORMATION ON THIS D MAINTENANCE DEPARTMENT FOR DESIGNATED STORE "REFRIGERANT		
STORE DIRECTOR PRINTED NAME	E (OR OTHER DESIGNATED STORE M	Anager):			
SIGNATURE: DATE:					
					

Fig. 21

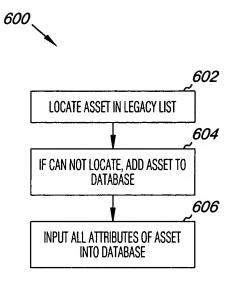


Fig. 23

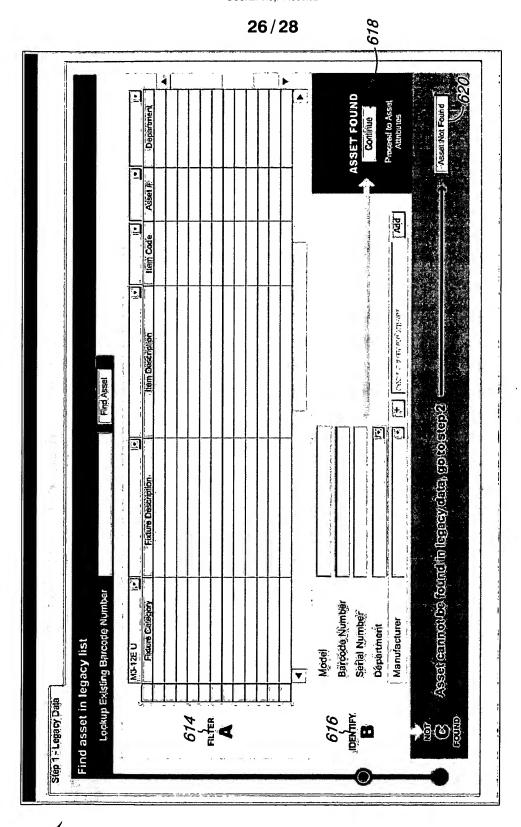
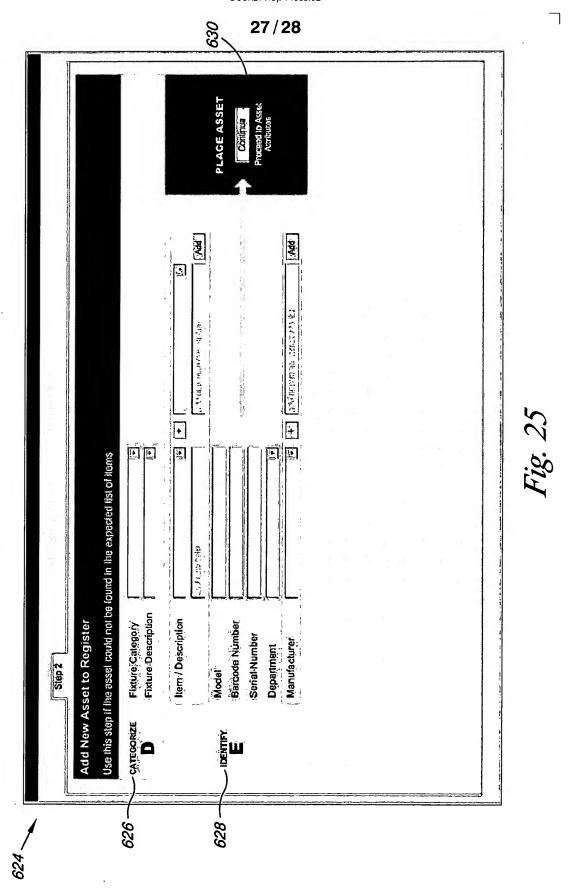


Fig. 24



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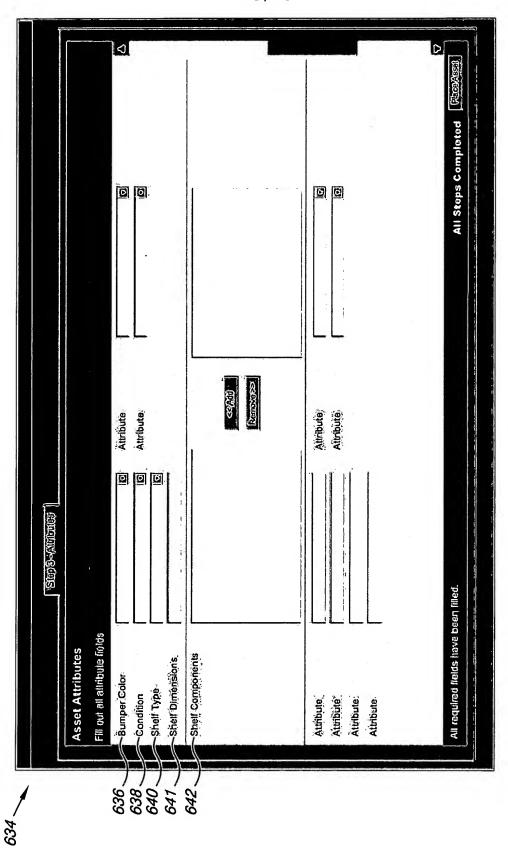


Fig. 26

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